



TOBACCO CONTROL STRATEGIES

FOR MISSISSIPPIANS WITH DISABILITIES

- ▶ Smoking & Mental Health
- ▶ Myths about Smoking and Mental Health
- ▶ Tobacco Cessation Therapies



INSTITUTE FOR DISABILITY STUDIES
THE UNIVERSITY OF SOUTHERN MISSISSIPPI

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TCS News

Tobacco Cessation Information for All Mississippians, Including People with Disabilities

quitSTART Smartphone App



The quitSTART app is a free smartphone* app that helps you quit smoking with tailored tips, inspiration, and challenges.

For more information on the quitSTART app, visit:

<http://bit.ly/quitstartapp>

*available on Apple Store and Google Play Store

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<https://usmids.org/home/tobacco-control-strategies/>



<https://www.facebook.com/msusmids>

AA/EOE/ADA

Smoking & Mental Health

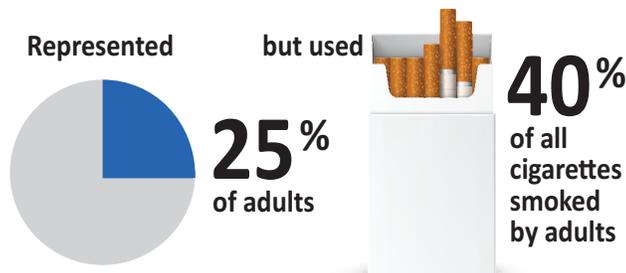
Approximately twenty-five percent of adults in the United States have some form of mental illness or substance use disorder (SUD). These same individuals also consume almost 40% of all cigarettes smoked by adults.

Mental Health First Aid is an in-person training for anyone who wants to learn about mental illnesses and addictions, including risk factors and warning signs. This 8-hour training teaches participants



a 5-step action plan to help a person in crisis connect with professional, peer, social, and self-help care.

Quick Start Guide <http://bit.ly/3a8s8tf>



Chad Morris, P. (2020, 2 26). SAMHSA. Retrieved from SAMHSA-HRSA Center for Integrated Health Solutions: https://www.integration.samhsa.gov/Smoking_Cessation_for_Persons_with_MI.pdf

Myths About Smoking and Mental Health

Some myths and misconceptions still exist about tobacco use among individuals with mental illness and substance abuse issues, such as:

- These individuals are not interested in breaking their habit.
- These individuals are not able to quit habitually smoking.
- Quitting smoking would interfere with mental illness/addiction treatments.
- Tobacco is not as harmful as other substances.

- Sometimes tobacco is required for self-medication.
- The process of tobacco cessation would be too troublesome.
- Tobacco cessation efforts might interfere with treatment(s) of other addictive behaviors.

However, when delivered alongside careful monitoring, smoking cessation therapies do not disrupt treatments for mental illness; in some cases, they can be integrated as part of the treatment process.

Tobacco Cessation Therapies



Individuals with mental health and/or substance use disorders are more than twice as likely to smoke cigarettes compared to those without such disorders. These individuals are also more likely to die as a result of smoking-related illness rather than a behavioral health condition. Many of these individuals want – and are able – to quit smoking, although more intensive therapy treatments may be required. Research supports that fully integrating tobacco cessation interventions into behavioral health treatment, in combination with implementing tobacco-free campus policies at behavioral health treatment facilities, could lead to decreases in both the use of tobacco products and tobacco-related illness, as well as the improvement of behavioral health outcomes among individuals with mental health and SUDs.

Pharmacotherapy

Pharmacotherapy relates to the utilization of pharmaceutical products to aid in the therapy process. Pharmacotherapies for smoking cessation are designed to reduce withdrawal symptoms and other effects without causing excessive negative effects.

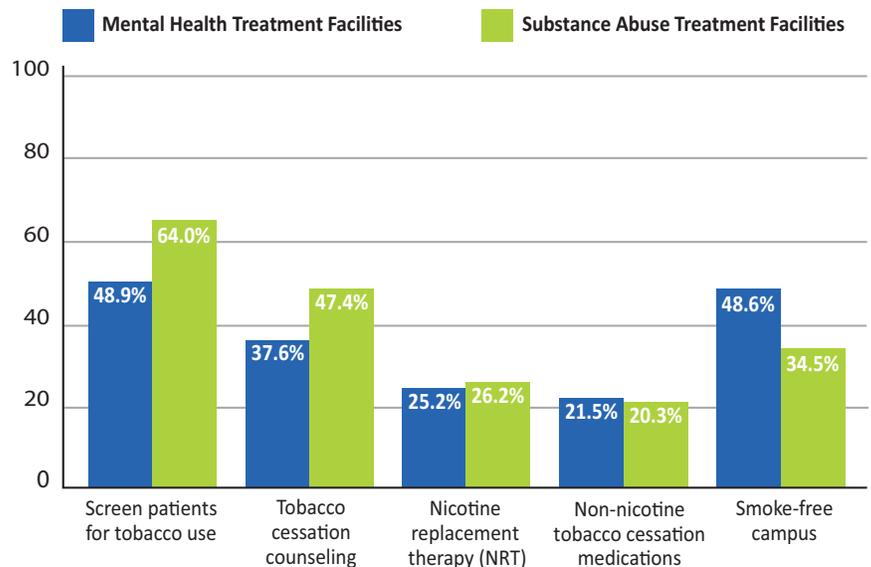
Nicotine Replacement Therapy (NRT) provides small, slow-release nicotine doses to treat withdrawal and dependence without exposure to other toxic chemicals. NRT products are available in the form of patches, gum, lozenges, inhalers, and nasal spray. While NRT treatments have been available since 1984, other medication regimens can be utilized as well.

Common non-nicotine tobacco cessation medications utilized in treatments include bupropion and varenicline. Bupropion functions by blocking certain behavior-reinforcing neurotransmitters, such as dopamine and norepinephrine. Varenicline functions similarly, controlling the release of dopamine and preventing nicotine from binding to receptors.

Cessation counseling

In most mental health facilities, trained physicians/therapists lead cessation counseling sessions, either individual-level or sometimes as a group. In cessation counseling, the physician/therapist teaches behavioral techniques with support to address smoking habits. Group therapy has the added benefit of promoting peer support and is typically more cost-effective; that said, side-by-side comparisons between each therapy type are limited.

TOBACCO CESSATION THERAPIES



<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5944973/>

Resources in this Issue:

Centers for Disease Control and Prevention. (2019). Tobacco Use Among Adults with Mental Illness and Substance Use Disorders. Accessed at: <https://bit.ly/32AWjgJ>

Centers for Disease Control and Prevention. (2019). quitSTART App | Quit Smoking | Tips From Former Smokers. Accessed at: <https://bit.ly/quitstartapp>

Marynak K, VanFrank B, Tetlow S, et al. (2018). Tobacco Cessation Interventions and Smoke-Free Policies in Mental Health and Substance Abuse Treatment Facilities — United States, 2016. Accessed at: <https://bit.ly/2HQACcm>

Prochaska, J. J., Das, S., & Young-Wolff, K. C. (2017). Smoking, mental illness, and public health. Annual review of public health, 38, 165-185.

Mississippi tobaccoQUITLINE
1.800.QUITNOW
WWW.QUITLINEMS.COM 1.800.784.8669

 **UMMC**
ACT Center for Tobacco Treatment,
Education and Research
601.815.1180 act2quit.org